

Dear Parents:

Welcome to the Simi Valley Unified School District, a place where every child is given the opportunity to learn and grow. Our mission is to support all students to become the best potential version of themselves. We are pleased to include you as a partner with us in your child's education.

Your child's first day of school can be a sometimes emotional yet exciting experience that we are pleased to share with you. The day your child enters the transitional kindergarten program marks the beginning of a new educational adventure in your family's life. We want you to know that your child's school views you as an important participant in your child's education and is committed to providing many experiences which will enhance your child's growth and development.

Both research and our experience as educators support the fact that parent involvement in children's education is a very significant factor in a child's success in school. We encourage you to become involved with your school and your PTA as a partner in crafting the educational journey your child is about to take.

The Simi Valley Unified School District's transitional kindergarten program has been designed to optimize your child's development during this important first year of formal education. Our teachers, administrators and staff have the training and experience necessary to support your children every step of the way through their first year of school. They appreciate your trust and support. Our caring and dedicated office staff are also there to assist you.

For the 2024-25 school year, students born between September 2, 2019 and September 1, 2020 are eligible to enroll in the Transitional Kindergarten Program. TK is year one of a two-year Kindergarten program. Participating students would be enrolled in the Traditional Kindergarten Program the following year.

If you feel that your child would benefit from placement in the Simi Valley Unified School District TK program and has a birth date that occurs between July 1 and September 1, 2019, you may apply for Deferred Kindergarten enrollment. Only children with a birth date in this window who **have not** participated in a previous TK program may apply. Please contact the Elementary Education desk at the District Office, 805-306-4500 x4207.

For more information about our TK program for the 2024-2025 school year, please visit our website at www.simivalleyusd.org, and search for Kindergarten Programs.

Should you have any questions at any time during your child's school experience, please do not hesitate to contact your child's school or our district staff. We look forward to a powerful partnership with you in your child's education. We welcome you and your child to the Simi Valley Unified School District. Simi Valley Schools, from here to anywhere.

Sincerely,

Dr. Hani Youssef
Superintendent of Schools

From Here to Anywhere



SimiValleySchools

SIMI VALLEY UNIFIED SCHOOL DISTRICT

Welcome to Transitional Kindergarten!

Dear Prospective Transitional Kindergarten (TK) Families:

Thank you for your interest in the TK program at our Simi Valley Schools! We are excited to offer this program to our community.

TK is a full-day program with a specific curriculum geared for our youngest learners. Our TK students attend the same number of hours as our Kindergarten through 5th grade students. Classes are led by credentialed teachers with early childhood experience. TK is year one of a two year Kindergarten program. After students complete the year of TK, they will move into Kindergarten the following year.

The TK program is currently offered at 16 of our 18 elementary schools as well as Justin Early Learners Academy. TK is not a School of Choice program. Every effort is made to prioritize a student's placement in their home/neighborhood school, as well as where siblings are enrolled, but we cannot guarantee placement due to required class size restrictions and availability of classroom space.

ELIGIBILITY:

For the 2024-25 school year, students whose date of birth falls between September 2, 2019 and September 1, 2020 are eligible to enroll in the Transitional Kindergarten Program. TK is year one of a two year Kindergarten program. Participating students would be enrolled in the Regular/Traditional Kindergarten Program the following year.

If your child has a birth date that occurs between July 1 and September 1, 2019 and feel they would benefit from TK, you may apply for Deferred Kindergarten enrollment. Only children with a birth date in this window who **have not** participated in a previous TK program may apply. Please contact the Elementary Education desk at the District Office, 805-306-4500 x4207.

ENROLLMENT:

All TK enrollment is completed at the District Office located at 101 W Cochran, Simi Valley. The office is open for enrollment 8:00 a.m. - 3:30 p.m. daily.

Priority enrollment is open until March 22, 2024. Priority enrollment provides families with the best opportunity to be placed at their neighborhood or sibling attended school. However, class size and classroom space will determine enrollment capacity. Enrollment received after March 22, 2024 will be placed based on availability of space remaining.

The information required for the initial TK enrollment can be found on the second page of this document. It is essential that you refer to this checklist to accurately complete the initial enrollment process. We are unable to accept incomplete packets.

Please contact Breanna Loniero at 805-306-4500 x4207 for assistance or to answer any questions about the enrollment process. For more information about our TK program for the 2024-2025 school year, please visit our website at www.simivalleyusd.org, and search for Kindergarten Programs.

Sincerely,
Erin Taggart
Director of Elementary Education



TK ENROLLMENT PROCESS

INITIAL TK ENROLLMENT DOCUMENTS DUE AT TIME OF ENROLLMENT

- Completed Enrollment Form
- Copy of Birth Certificate or Passport
- Proof of Residence
(Utility Bill - Gas, Water, Electric, or Solar *only*. Lease/rental agreement or finalized escrow documents.)
- Current Immunization Records
- TK Age Eligibility Form

DUE BEFORE AUGUST 14, 2024 (the first day of school)

- Completed Immunization Record (4 Polio, 5 DPT, 2 MMR, 1 Varicella, 3 Hepatitis B)

The enrollment form, proof of birth, proof of residence, and current immunization status must be completed and returned to be considered eligible for TK placement.

****Children will not be allowed to begin school unless a completed record of immunization is on file in the school office. Your placement may be forfeited without the required documentation.****



SIMI VALLEY UNIFIED SCHOOL DISTRICT ENROLLMENT FORM

(PLEASE DO NOT WRITE OR TYPE IN SHADED AREAS)

Student ID
School

Sp. Ed. Code

Entry Date

Student Information (PLEASE PRINT)

Legal Last Name _____ Suffix _____ (Jr., Sr., etc.)

Legal First Name _____ Legal Middle Name _____

Male Female Non-Binary Grade _____ Age _____ Birth Date ____/____/____

Birth City _____ Birth State _____ Birth Country _____

Primary Residence

Street Address _____ Unit # _____ City _____ State _____ Zip _____

Mailing Address (if different than primary residence)

Street Address or P.O. Box _____ Unit # _____ City _____ State _____ Zip _____

Student Mobile Phone # (_____) _____ - _____
(If applicable)

Parent/Guardian _____ Primary Telephone (_____) _____ - _____

Is the student's ethnicity
Hispanic/Latino?

- ☐ Yes
☐ No

The above part of the question is about ethnicity, not race. *No matter what you selected above, please answer the section to the right* by marking one or more boxes to indicate what you consider the student's race to be.

What is the student's Race? (Please check all that apply)

- | | <u>Asian</u> | <u>Pacific Islander</u> |
|---------------------------|---------------------------------------|---|
| Alaskan / Native American | <input type="checkbox"/> Chinese | <input type="checkbox"/> Hawaiian |
| Black / African American | <input type="checkbox"/> Japanese | <input type="checkbox"/> Guamanian |
| | <input type="checkbox"/> Korean | <input type="checkbox"/> Samoan |
| | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Tahitian |
| Caucasian / White | <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Other Pacific Islander |
| | <input type="checkbox"/> Laotian | |
| | <input type="checkbox"/> Cambodian | |
| | <input type="checkbox"/> Other Asian | |
| | Filipino | |
| | Hmong | |

Student's Communication Language: English or Spanish
(CorrLng)

Has your child attended SVUSD schools previously? ☐ No ☐ Yes Date: ____/____/____

LAST SCHOOL STUDENT ATTENDED:

School Name _____ Phone: (____) ____ - ____

School Address _____ City: _____

State: _____ Zip: _____

District Enter Date: ____/____/____

School Enter Date: ____/____/____

Home Language Survey: The California Education Code contains legal requirements which direct schools to assess the English language proficiency of students. The process begins with determining the language(s) spoken in the home of each student. The responses to the home language survey will assist in determining if a student's proficiency in English should be tested. This information is essential in order for the school to provide adequate instructional programs and services.

(Please indicate only one language per line):

1. Which language did your child learn when he/she first began to talk?	_____
	(First)
2. What language do you use most frequently to speak to your child?	_____
	(Primary)
3. What language does your child most frequently use at home?	_____
	(at Home)
4. What language is most often spoken by adults in the home?	_____
	(by Adults)

Date student first attended any public school in the U.S. ____/____/____

Date student first attended any public school in California ____/____/____

Residence: Where is your child/family currently living?

Please check appropriate box:

- ☐ In a single family permanent residence (house, apt., condo, mobile home)
- ☐ Doubled-Up (sharing housing with other families/individuals due to economic hardship or loss)
- ☐ In a shelter or transitional housing program
- ☐ In a motel/hotel
- ☐ Unsheltered (car/campsite)
- ☐ Other (please specify): _____

SPECIAL PROGRAMS:

Special Education

Has your child qualified for a Special Education Program? ☐ No ☐ Yes If yes, please provide a copy of the IEP
(____ Resource (RSP) ____ Special Day Class (SDC) ____ Speech/Language)

504 Plan

Does your child have a 504 Plan? ☐ No ☐ Yes: If yes, please provide a copy of the 504 Plan

G.A.T.E.

Has your child qualified for the G.A.T.E.(Gifted) Program? ☐ No ☐ Yes

SIBLINGS:			Birth Date	Name of Current School
			____/____/____	
Last	First	Middle	mo./day/year	
			____/____/____	
Last	First	Middle	mo./day/year	
			____/____/____	
Last	First	Middle	mo./day/year	
			____/____/____	
Last	First	Middle	mo./day/year	
			____/____/____	
Last	First	Middle	mo./day/year	

Student Guardianship Status: ☐ Parent/Legal Guardian ☐ Foster Family ☐ Licensed Children's Inst.
☐ Foreign Exchange ☐ Other: _____

If a custody agreement exists, it is the responsibility of the Parents/Legal Guardians to provide the school with a copy of the agreement. In the absence of a legally binding agreement, the Parents/Legal Guardians listed will be presumed to have full and equal custodial rights.

For students in Foster Care or LCI Placement: The student's foster parent or case manager must supply a copy of the Court Findings and Orders.

PARENT/GUARDIAN:

Parent/Guardian #1:

☐ Mother ☐ Father ☐ Other: _____

Does the student live with this Contact? ☐ Yes ☐ No Communication Language _____

Parent Education: ☐ Graduate Degree or Higher ☐ College Graduate ☐ High School Graduate ☐ Not a High School Graduate ☐ Some College or Associates Degree
(CorrLng)

Name: Last First	Primary Number: () --
Mailing address if different from primary residence:	Work Number: Ext. () --
Street City State Zip	Mobile Number: () --
E-Mail Address: _____	

Parent/Guardian #2:

☐ Mother ☐ Father ☐ Other: _____

Does the student live with this Contact? ☐ Yes ☐ No Communication Language _____

Parent Education: ☐ Graduate Degree or Higher ☐ College Graduate ☐ High School Graduate ☐ Not a High School Graduate ☐ Some College or Associates Degree
(CorrLng)

Name: Last First	Primary Number: () --
Mailing address if different from primary residence:	Work Number: Ext. () --
Street City State Zip	Mobile Number: () --
E-Mail Address: _____	

EMERGENCY CONTACTS:

Emergency Contact #1

Type: ☐ Relative _____ (relationship to student)

☐ Friend ☐ Babysitter ☐ Other: _____

Name: Last First	Primary Number: () --
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Emergency Contact #2

Type: ☐ Relative _____ (relationship to student)

☐ Friend ☐ Babysitter ☐ Other: _____

Name: Last First	Primary Number: () --
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Emergency Contact #3

Type: ☐ Relative _____ (relationship to student)

☐ Friend ☐ Babysitter ☐ Other: _____

Name: Last First	Primary Number: () --
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Student Medical History

Student Name: _____

Student Id: _____

No on-going health problems or concerns: ☐

Please mark boxes and specify as needed: Health Problem(s)		Medication(s) for this Problem	Taken at Home	**Taken at School
<input type="checkbox"/>	Emotional/Mental Health Concerns		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	ADD/ADHD		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Autism Spectrum Disorder		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Anaphylaxis/Epi-Pen		<input type="checkbox"/>	<input type="checkbox"/>
	Allergy, nuts <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe		<input type="checkbox"/>	<input type="checkbox"/>
	Allergy (other) <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe Specify:		<input type="checkbox"/>	<input type="checkbox"/>
	Asthma <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Neurological Impairment		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Respiratory Condition		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Diabetes, Type I		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Diabetes, Type II		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Lactose Intolerance		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Cerebral Palsy		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Migraine and other headaches		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Digestive Problems		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Seizures		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Immune System Abnormalities		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Adverse Drug Reaction		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Hearing Concerns		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Speech Difficulty		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Congenital/Birth Abnormalities		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Scoliosis		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Heart Disease		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Vision Concerns – Glasses/Contacts		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Oncology (Cancer) Condition		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Organ Transplant		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Concussion		<input type="checkbox"/>	<input type="checkbox"/>
Other current health problems:				
List Physical Health Care Needs at School (excluding medications) i.e., wheelchair, G-tube feedings, nebulizer, etc.:				
** For a student to take medication at school during the school day the "Request for Medication to be Taken During School Hours" form must be completed by Physician and parent.				

Signature of Parent/Guardian _____

Date _____



TRANSITIONAL KINDERGARTEN AGE-ELIGIBILITY FORM

I have been informed that my Transitional Kindergarten (TK) age-eligible* child:

_____ will be enrolled in a TK program in
Name of Child Birthdate

the Simi Valley Unified School District for the _____ school year.

Transitional Kindergarten is the first year of a two-year kindergarten program as established by the Kindergarten Readiness Act of 2010 (SB 1381).
Transitional Kindergarten is year one. *Traditional* Kindergarten is year two. Transitional Kindergarten students will be promoted to Traditional Kindergarten at the end of the school year.

District/School Official Date provided to parent

Name of parent/guardian Parent signature Date

This **Transitional Kindergarten Age-Eligibility Form** must be placed in student's cumulative folder.

*Below is the TK age eligibility:

Children born on or before September 1, 2020 shall be admitted to a Transitional Kindergarten program.



CONGRATULATIONS!

Your child is entering Transitional Kindergarten!

DID YOU KNOW....

Showing up on time every day is important to your child's success and learning from Transitional Kindergarten forward.

Missing 10% of school (1 to 2 days every few weeks) can make it harder to:

- Gain early reading and math skills.
- Build relationships.
- Develop good attendance habits.

High quality Transitional Kindergarten has many benefits!

- The routines your child develops will continue throughout their school career.
- Make the most of early school years by encouraging your child to attend every day.

WHAT YOU CAN DO

Work with your child and their teacher to develop your child's strong attendance.

Talk about it – sing about it – make it an adventure!

- Set a regular bedtime and morning routine.
- Lay out clothes and pack backpacks the night before.
- Share ideas with other parents for getting to school on time.

Before the school year starts:

- Find out what day school starts and begin a countdown.
- Attend orientation with your child to meet teachers and classmates and find out about health and safety procedures.

Ready, Set, GO!

- Try to schedule medical appointments and extended trips when school is not in session.
- If your child seems anxious about Transitional Kindergarten, talk to the teacher, the principal, or other parents for advice.

It is expected your child attends school each day!


Health, family emergencies, and justified personal reasons are the only legal excuse for non-attendance.

(Ed. Code 26010, 46010.5, 48205)

Dear Parents:

Welcome to the Simi Valley Unified School District! We are pleased and privileged to serve your family as VIPs in our school community! Your completion of the following **REGISTRATION REQUIREMENTS** will secure ON-TIME admission for your child as you join our team for children's health and school success!

KEYS for SUCCESSFUL TRANSITIONAL KINDERGARTEN REGISTRATION AND ADMISSION:

 **IMMUNIZATIONS:** The California Health and Safety Code* requires that all kindergartners, *including transitional kindergartners*, receive the following immunizations prior to admission to school:

BY LAW, NO STUDENT WILL BE ALLOWED TO START SCHOOL WITHOUT PROPER IMMUNIZATION DOCUMENTATION ON FILE. NO GRACE PERIOD IS ALLOWED.

VACCINE	REQUIRED DOSES
Polio	4 doses at any age, but... 3 doses meet requirement for ages 4-6 years if at least one was given on or after the 4 th birthday; 3 doses meet requirement for ages 7-17 years if at least one was given on or after the 2 nd birthday.
Diphtheria, Tetanus, and Pertussis	Age 6 years and under: DTP DTaP or any combination of DTP or DTaP with DT (diphtheria and tetanus) 5 doses at any age, but... 4 doses meet requirements for ages 4-6 years if at least one was on or after the 4 th birthday.
Measles, Mumps, Rubella (MMR)	Kindergarten: 2 doses both on or after 1 st birthday
	7th grade: 2 doses both on or after 1 st birthday
	Grades 1-6 and 8-12: 1 dose on or after 1 st birthday
Hepatitis B	Kindergarten: 3 doses at any age
Varicella (Chicken Pox)	2 doses if child has not had chicken pox (verified)
Tdap Booster (Tetanus, reduced diphtheria, and Pertussis)	7th grade: 1 dose on or after 7 th birthday

*California Health and Safety Code Section, Division 105, Part 2, Chapter 1, Sections 120325-120380 and the California Code of Regulations, Title 17, Division 1, Chapter 4, Subchapter 8, Sections 6000-6075.

Completion of health and safety admission requirements opens the door for a very successful school year for your child and their classmates! Thank you for your cooperation and support!

Sincerely,

Sean Goldman
Assistant Superintendent, Student Support Services

WHY IMMUNIZE ???

Childhood immunization has been called our society's greatest health care achievement. The development and widespread use of vaccines has led to the reduction or eradication of once common childhood diseases. However, the viruses and bacteria that cause vaccine-preventable disease and death still exist and can be passed on to people who are not protected by vaccines.

See the chart below to get a brief understanding of how dangerous these diseases can be, and how immunizing against them protects children and saves lives.

Disease	What it Does
<u>Polio</u>	Causes acute paralysis that can lead to permanent physical disability and even death.
<u>Measles</u>	Rash that can cause complications such as pneumonia, diarrhea or ear infections in 9% of those infected. Some develop encephalitis, which results in brain damage. Measles can be fatal.
<u>Haemophilus Influenzae Tybe B (Hib) Meningitis</u>	Most common cause of bacterial meningitis in the U.S. before the vaccine. Led to deafness, seizures or mental retardation in those who survived the disease.
<u>Pertusis (Whooping Cough)</u>	Can lead to pneumonia, seizures, brain disease and death in infants. Results in prolonged coughing that lasts for many weeks, causing dehydration and vomiting.
<u>Rubella (German Measles)</u>	Usually mild in children and adults, up to 90% of infants born to infected mothers will develop congenital rubella syndrome (CRS), resulting in heart defects, cataracts, mental retardation and deafness.
<u>Varicella (Chickenpox)</u>	Always present in the community and highly contagious. Can be severe in some, leading to complications such as dehydration, pneumonia, and shingles. Children miss a week or more of school, on average, when infected with chickenpox.
<u>Hepatitis B</u>	Infants and children who become infected with Hepatitis B are at the highest risk of developing life-long infection, which often leads to death from liver disease and liver cancer.

Disease	What it Does
<u>Diphtheria</u>	A serious disease caused by poison produced from the bacteria. It frequently causes heart and nerve problems. Diphtheria disease can also be fatal.
<u>Tetanus (Lock Jaw)</u>	A severe, often fatal disease. Leads to stiffness and spasms of the muscles. Can cause the throat to close, and spasms can cause fractures.
<u>Mumps</u>	Once a major cause of deafness in children, occurring in approximately 1 of every 20,000 cases reported. Can cause swelling of the brain, nerves and spinal cord that can lead to paralysis, seizures and fluid in the brain.
<u>Smallpox</u>	Smallpox is a serious, contagious, and sometimes fatal infectious disease. There is no specific treatment for smallpox disease, and the only prevention is vaccination. The <i>pox</i> part of <i>smallpox</i> is derived from the Latin word for "spotted" and refers to the raised bumps that appear on the face and body of an infected person.
<u>Influenza</u>	The flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to death. Some people, such as older people, young children, and people with certain health conditions (such as asthma, diabetes, or heart disease), are at high risk for serious flu complications.
<u>Pneumococcal</u>	Symptoms of pneumococcal disease include pneumococcal pneumonia (high fever, cough, and shortness of breath), bacteremia (fever and feeling generally poorly), and meningitis (fever, headache, thinking slowly or not clearly).
<u>Hepatitis A</u>	Hepatitis A is a serious liver disease. Hepatitis A can cause, flu-like illness, jaundice, severe stomach pains and diarrhea (children). Some who contract Hepatitis A will die each year.
<u>Human Papillomavirus (HPV)</u>	HPV is the most common sexually transmitted virus in the United States. HPV can cause cervical cancer in women, and is associated with several less common cancers, in both men and women.
<u>Rotavirus</u>	Rotavirus is a virus that causes diarrhea (sometimes severe), mostly in babies and young children. It is often accompanied by vomiting and fever, and can lead to dehydration.
<u>Meningococcal</u>	Meningococcal bacteria is another cause of Meningitis, a serious infection of the covering of the brain. It can also cause blood infection. 10-15% of Meningitis cases cause death, of survivors 11-19% will lose their arms and/or legs, become deaf, mentally retarded, or suffer seizures or strokes.

VACCINE SAFETY:

1. Are Vaccines safe?

Yes. Vaccines are safe. Millions of children and adults are vaccinated every year. However, any medicine can cause reactions in some people. The most common side effects are swelling or tenderness at the injection site and fever. Serious reactions are very rare, happening in 1-2 people out of a million shots given.

Thousands of people take part in clinical trials to test a vaccine before it is licensed by the Food and Drug Administration (FDA). After it's licensed, the Vaccine Adverse Events Reporting System (VAERS) helps track any health effect that happens hours, days, weeks, or even months later. Anyone can report a possible side-effect so that it can be studied. This monitoring helps ensure vaccines are safe.

2. Why do children today get so many immunizations?

To save lives. Advances in medical science have developed vaccines to protect us against more than 15 dangerous diseases. Only a few years ago vaccines prevented just a small handful of diseases. Who benefits most? Babies. Their bodies may be too weak to fight off a serious disease. Many vaccine-preventable diseases can have dangerous complications. These include seizures, brain damage, blindness, and even death.

3. Are diseases of the “old days” really still something to worry about?

Diseases do exist—though many young parents haven't seen them. This is the success of our country's immunization program. But people not vaccinated, especially children, are at risk for common illnesses like influenza, whooping cough, and chicken pox. Did you know that before the chicken pox vaccine, almost 11,000 Americans had to go to the hospital, and over 100 died, each year from chicken pox? Less common diseases like meningitis, measles, and mumps happen unexpectedly and can spread quickly. Some diseases are just a plane ride away. International travelers not up-to-date on their shots can easily bring a disease back home and infect other people.

- In 2008 one San Diego child got measles on a family trip to Switzerland. Back home he spread it to family members, classmates—even children at the doctor's office. Only kids without their shots got sick, including a baby who had to spend time in the hospital. However, dozens of children who came near someone with measles had to be kept home for weeks to make sure the disease didn't spread any further.
- In a 2006 outbreak in the Midwest, more than 5,000 high school and college students got mumps. Unvaccinated people, or those who had only one shot, were the most likely to get mumps.
- Whooping cough is on the rise in California. Cases have tripled in recent years. It's a nasty disease at any age. But babies can die. Families, child care workers, and communities that get all their shots protect our most vulnerable little ones from getting infected.

4. What about holistic medicine or “natural immunity”?

Many holistic medicines have helpful effects. But they do not provide immunity to diseases prevented by vaccines. Before vaccines, millions of children became ill with whooping cough, measles, mumps and other diseases. Most vaccines are over 99% effective in preventing illness. Some people believe getting a disease is the “natural” way to trigger the body's immune response. Vaccines work the same way—they trigger an immune response—but not the disease. Vaccine immunity **is** natural immunity. According to Dr. Andrew Weill, a supporter of holistic medicine, “...*Immunization facilitates a natural process by stimulating encounters between the body's immune system and killed or weakened viruses and bacteria (or pieces and products of them).*” Waiting for immunity from the real disease can be dangerous because it means getting sick with a risk of serious complications.

5. Is it safe for a child's immune system to have multiple shots?

Yes. Children are exposed to hundreds of viruses or bacteria (called antigens). This happens during normal activities like eating and playing. Antigens make the immune system do its work. Getting vaccines is no extra burden—even for babies. Healthy babies' immune systems easily handle weakened or killed vaccine antigens. Truly, vaccines are only a small drop in the bucket compared to what children face every day.

What about “combination” vaccines (when a single shot protects against more than one disease)? Or getting several shots in one visit? Multiple shots are safe. In fact, today's vaccines are more refined than in the past. So even though kids get more vaccines, they get far fewer antigens all together.

6. What about getting shots later, or more spread out?

Most doctors follow the recommended immunization schedule. This is because skipping or delaying shots leaves a child at risk for a longer time. And, there is no proof that receiving fewer shots in one visit is any safer. Young children and babies are the most likely to get very sick from certain diseases. That's why shots are given to babies and why most pediatricians use the standard schedule. It's your job to protect your child. It's the doctor's job to listen and advise you. And it's quite normal to feel nervous when your child is due for shots. So talk about your concerns. If you have wondered about delaying any shots, the doctor can help you weigh the risks and benefits of any choice.

7. Do vaccines cause autism?

No. Autism has been increasing around the world for many years. In fact, autism rates are the same in vaccinated and unvaccinated children. No one knows yet what causes autism. But we do know that autism symptoms often start at about the same age young children get their routine shots. This can make shots seem related. The group Autism Speaks, which helps fund international research, has a statement supporting children's

immunization. Another group, the Organization for Autism Research has a helpful parents' guide.

Twenty-three studies have tested hundreds of thousands of children and found no link between autism and vaccines. One 1998 study suggested a connection between MMR vaccine and autism. But that study was retracted by 10 of its authors in 2004 and is now discredited. The American Medical Association, American Academy of Pediatrics, Institute on Medicine, and World Health Organization have statements saying that there is no connection between vaccines and autism.

8. What about kids with rare disorders like mitochondrial disease?

Mitochondrial disease (MD), a rare disorder, has been in the news recently. A federal claims court has been examining if symptoms of brain injury and autism in a girl with MD *may* have been related to her vaccinations. The child's family has discussed her case with the press. But, as of September 2008, the court has not yet made a ruling on her case.

The important question is: should a child with MD get routine shots? According to mitochondrial disease specialists, the answer is **yes**. That's because vaccines prevent diseases like measles, mumps, and chickenpox that are especially dangerous to kids with MD.

9. What about thimerosal (or mercury) in vaccines?

Thimerosal was removed from all child vaccines in 2001 (except some flu shots) as a way to reduce mercury exposure to children from all sources. Thimerosal is a preservative made with ethylmercury. It prevents contamination. Some people worry that mercury is dangerous. However, no reliable study has found any link between thimerosal in vaccines and developmental diseases. Recent research shows that autism rates continue to go up even after thimerosal was taken out of vaccines.

By California law, children under age 3 and pregnant women cannot have vaccines with more than "trace" thimerosal. Trace means that thimerosal added during manufacturing is removed. This leaves a tiny amount (1 microgram, instead of 25 or 50). Some flu vaccines for adults or older children still use thimerosal. If you're concerned, ask your doctor about a thimerosal-free flu vaccine.

10. What about other vaccine ingredients?

There is no evidence that vaccine ingredients are harmful. The ingredients are used in tiny amounts for very specific purposes. Read more below.

- **Aluminum:** Aluminum in vaccines is used as an "adjuvant" to trigger the body's immune response to a disease. There is little reason to worry about aluminum in vaccines. Aluminum is common in food and drinks including fruit and vegetables—even breast milk and

infant formula. It's also in antacids, antiperspirants, cooking pots, and soda cans. The Children's Hospital of Philadelphia says that at 6 months old, babies have had less aluminum from vaccines than they get from breast milk. Bottle-fed babies get more daily aluminum — especially from soy formulas.

- **Formaldehyde:** prevents microbial contamination. It's used in tiny amounts in some vaccines. It's also in the environment and is a natural byproduct of the body's metabolism.
- **False claims:** Vaccines **do not** contain anti-freeze, chick embryos, or monkey kidneys. This is false information.

Make your research work for you

Be choosy about what you read and the information you rely on.

We recommend these trusted sites:

American Academy of Pediatrics

www.aap.org/immunization

National Network for Immunization

www.immunizationinfo.org

Thimerosal FAQs

www.fda.gov/CBER/vaccine/thimerosal.htm

Do Vaccines Cause That? (Book)

www.i4ph.org

Evaluating Health Information on the Web

www.immunizationinfo.org/parents/evaluatingWeb.cfm

Parents of Kids with Infectious Diseases

www.pkids.org

California Immunization Coalition

909 12th Street, Suite 200

Sacramento, CA 95814

(916) 447-7063 ext. 333

www.immunizeCA.org

Type 1 Diabetes Information

Pursuant to California Education Code Section 49452.6, this type 1 diabetes information is for local educational agencies to provide to parents and guardians of incoming elementary school students beginning January 1, 2023.

Type 1 diabetes in children is an autoimmune disease that can be fatal if untreated, and the guidance provided in this information sheet is intended to raise awareness about this disease.

Description

Type 1 diabetes usually develops in children and young adults but can occur at any age

- According to the U.S. Centers for Disease Control and Prevention (CDC), cases of type 1 diabetes in youth increased nationally from 187,000 in 2018 to 244,000 in 2019, representing an increase of 25 per 10,000 youths to 35 per 10,000 youths, respectively.
- The peak age of diagnosis of type 1 diabetes is 13-14 years, but diagnosis can also occur much earlier or later in life.

Type 1 diabetes affects insulin production

- As a normal function, the body turns the carbohydrates in food into glucose (blood sugar), the basic fuel for the body's cells.
- The pancreas makes insulin, a hormone that moves glucose from the blood into the cells.
- In type 1 diabetes, the body's pancreas stops making insulin, and blood glucose levels rise.
- Over time, glucose can reach dangerously high levels in the blood, which is called hyperglycemia.
- Untreated hyperglycemia can result in diabetic ketoacidosis (DKA), which is a life-threatening complication of diabetes.

Risk Factors Associated with Type 1 Diabetes

It is recommended that students displaying warning signs associated with type 1 diabetes, which are described below, should be screened (tested) for the disease by their health care provider.

Risk Factors

Researchers do not completely understand why some people develop type 1 diabetes and others do not; however, having a family history of type 1 diabetes can increase the likelihood of developing type 1 diabetes. Other factors may play a role in developing type 1 diabetes, including environmental triggers such as viruses. Type 1 diabetes is not caused by diet or lifestyle choices.

Warning Signs and Symptoms Associated with Type 1 Diabetes and Diabetic Ketoacidosis

Warning signs and symptoms of type 1 diabetes in children develop quickly, in a few weeks or months, and can be severe. If your child displays the warning signs below, contact your child's primary health care provider or pediatrician for a consultation to determine if screening your child for type 1 diabetes is appropriate:

- Increased thirst
- Increased urination, including bed-wetting after toilet training
- Increased hunger, even after eating
- Unexplained weight loss
- Feeling very tired
- Blurred vision
- Very dry skin
- Slow healing of sores or cuts
- Moodiness, restlessness, irritability, or behavior changes

DKA is a complication of untreated type 1 diabetes. DKA is a medical emergency. Symptoms include:

- Fruity breath
- Dry/flushed skin
- Nausea
- Vomiting
- Stomach pains
- Trouble breathing
- Confusion

Types of Diabetes Screening Tests That Are Available

- **Glycated hemoglobin (A1C) test.** A blood test measures the average blood sugar level over two to three months. An A1C level of 6.5 percent or higher on two separate tests indicates diabetes.
- **Random (non-fasting) blood sugar test.** A blood sample is taken any time without fasting. A random blood sugar level of 200 milligrams per deciliter (mg/dL) or higher suggests diabetes.

- **Fasting blood sugar test.** A blood sample is taken after an overnight fast. A level of 126 mg/dL or higher on two separate tests indicates diabetes.
- **Oral glucose tolerance test.** A test measuring the fasting blood sugar level after an overnight fast with periodic testing for the next several hours after drinking a sugary liquid. A reading of more than 200 mg/dL after two hours indicates diabetes.

Type 1 Diabetes Treatments

There are no known ways to prevent type 1 diabetes. Once type 1 diabetes develops, medication is the only treatment. If your child is diagnosed with type 1 diabetes, their health care provider will be able to help develop a treatment plan. Your child's health care provider may refer your child to an endocrinologist, a doctor specializing in the endocrine system and its disorders, such as diabetes.

Contact your student's school nurse, school administrator, or health care provider if you have questions.

Ventura County Public Health
CHDP Program Providers

BUI

Bui, Minh MD
631 Cooper Road
Oxnard, CA 93030
487-9150 **487-9152

CDCR/EL RIO

(Clinicas Del Camino Real/El Rio)
221 E. Ventura Blvd., Ste 126
Oxnard, CA 93036
436-3444**fax485-4160

CDCR/E. SIMI VALLEY

(Clinicas Del Camino Real/ESV)
4370 Eve Road
Simi Valley, CA 93063
915-4400**fax915-4401

CDCR/ FILL

(Clinicas Del Camino Real/Fillmore)
355 Central Avenue
Fillmore, CA 93015
524-4926 **fax 524-1263

CDCR/LA COLONIA

(Clinicas Del Camino Real/La Colonia)
801 Cooper Rd
Oxnard, CA 93030
330-8100 **fax 240-7383

CDCR/MARAVILLA

(Clinicas Del Camino Real/Maravilla)
450 W. Clara Street
Oxnard, CA 93033
488-0210 **fax 488-0510

CDCR/MOORPARK

(Clinicas Del Camino Real/Moorpark)
4279 Tierra Rejada Road
Moorpark, CA 93021
222-2323 **fax 222-2333

CDCR/NEWBURY PARK

(Clinicas Del Camino Real/Newbury Park)
1000 Newbury Road, Suite 150
Newbury Park, CA 91320
498-3640**fax 498-3641

CDCR/N. OX

(Clinicas del Camino Real/N. Oxnard)
1200 North Ventura Road, Ste 10E
Oxnard, Ca 93030
988-0053**fax 988-0554

CDCR/OJAI

(Clinicas Del Camino Real/Ojai)
Ojai Valley Comm Health Center
1200 Maricopa Highway
Ojai, CA 93023
640-8293 **fax 640-1410

CDCR/OV

(Clinicas Del Camino Real / Ocean View)
4400 Olds Road
Oxnard, CA 93033
986-5551 **fax 986-5556

CDCR/OX

(Clinicas Del Camino Real/Oxnard)
650 Meta Street
Oxnard, CA 93030
487-5351 **fax 487-2599

CDCR/SP

(Clinicas Del Camino Real/Santa Paula)
500 E. Main Street
Santa Paula, CA 93060
933-0895 **fax 933-3836

CDCR/SV

(Clinicas Del Camino Real/Simi Valley)
1424 Madera Road
Simi Valley, CA 93065
522-5722 **fax 915-4141

CDCR/VTa

(Clinicas Del Camino Real/Ventura)
200 S. Wells Road, Suite 100
Ventura, CA 93004
647-6322 **fax 647-7164

CHILDREN'S MEDICAL GROUP

Dr. Victor Lin & Dr. Gurjit Marwah
915 W. 7TH Street
Oxnard, CA 93030
487-0669 **fax 487-8680

CMH/A

CMH Center for Family Health
3641 West 5th Street
Oxnard, CA 93035
985-5505 **fax 985-6390

CMH/AS

CMH Center for Family Health/Ashwood
120 N Ashwood Avenue.
Ventura, CA 93003
643-1871 **fax 642-1928

CMH/C

CMH Center for Family Health
422-B Arneill Road
Camarillo, CA 93010
383-4510 **fax 383-4511

CMH/F

CMH Center for Family Health
852 Ventura Street
Fillmore, CA 93015
524-2672 **fax 524-3953

CMH/M

CMH Center for Family Health
138 W. Main Street Suite E
Ventura, CA 93001
667-2850 **fax 652-0708

CMH/MIDTOWN MEDICAL

CMH Center for Family Health
2721 E. Main Street
Ventura, CA 93003
667-2841 **fax 667-2846

CMH/OV

Oakview Family Practice
655 Ventura Avenue.
Oak View, CA 93022
649-3750 **fax 649-3780

CMH/PH

CMH Center for Family Health
321 E. Port Hueneme Road.
Port Hueneme, CA 93041
652-4267 **fax 488-8082

CMH/PREMIER

CMH Center for Family Health
258 E. Harvard Blvd.
Santa Paula, CA 93060
525-8622 **fax 525-6667

CMH/S

CMH Center for Family Health
2921 S. Saviers Road.
Oxnard, CA 93033
487-5585 **fax 487-5589

CMH/SP

CMH Center for Family Health
242 E. Harvard Blvd. #C
Santa Paula, CA 93060
525-9595 **fax 525-6667

CMH/X

CMH Center for Family Health
2361 Vineyard Avenue.
Oxnard, CA 93036
981-3770 **fax 981-1022

DIGNITY- CAMARILLO

Dignity Health Medical Group
5051 Verdugo Way, Ste 110
Camarillo, CA 93010
384-8071**fax 482-2482

DIGNITY - ROSE

Dignity Health Medical Group
1700 N Rose Avenue., Ste. 210
Oxnard, CA 93030
988-8058 **fax 983-0803

HANS

Hansuvadha, Sam MD
963 W. 7TH Street
Oxnard, CA 93030
487-9897 **fax 487-6667

LYNE

Lyne, Alan MD
245 N. 10TH Street
Santa Paula, CA 93060
525-7515 **fax 933-1612

ROSE AVENUE

Rose Avenue Family Medical Group
451 W. Gonzales Rd., Ste. 230
Oxnard, CA 93036
988-1443 **fax 988-0897

VCMC/CV (C)

Conejo Valley Family Medical Group
125 W Thousand Oaks Blvd., Ste. 300
Thousand Oaks, CA 91360
418-9100 **fax 370-0619

VCMC/FCC

Academic Family Medicine Center
3291 Loma Vista Road.
Bldg 340, Ste. 201
Ventura, CA 93003
652-6100 **fax 652-3252

Ventura County Public Health
CHDP Program Providers

VCMC/FILLMORE (Z)

Fillmore Health Care Services
828 Ventura Street
Fillmore, CA 93015
524-2000**fax 524-9601

VCMC/LAS (L)

Las Islas Family Care Center
2400 South C Street
Oxnard, CA 93033
240-7000 **fax 486-0636

VCMC/LAS POSAS (2C)

Las Posas Family Medical
3801 Las Posas Road., Suite 214
Camarillo, CA 93010
437-0900**fax 987-2878

VCMC/MAG (G)

Magnolia Family Health Center
2220 E. Gonzales Road, Suite 120
Oxnard, CA 93036
981-5151 **fax 981-5150

VCMC/MB (B)

Mandalay Bay Children's Center
2000 Outlet Drive, Suite 110
Oxnard, CA 93036
604-4588 **fax 604-7469

VCMC/MPK (K)

Moorpark Family Care Center
612 Spring Road, Bldg. A
Moorpark, CA 93021
523-5400 **fax 523-2233

VCMC/PDC (D)

Pediatric Diagnostic Center
300 Hillmont Avenue
Bldg 340 Ste 302
Ventura, CA 93003
652-6255 **fax 641-4494

VCMC/JFC (R.)

John K. Flynn Community Clinic
(El Rio/Magnolia Family Care)
3100 N. Rose Avenue
Oxnard, CA 93036
983-6644**fax 983-6144

VCMC/SPH (Y)

Santa Paula Hospital Medical Clinic
825 North 10th Street
Santa Paula, Ca 93060
525-0215** fax 525-8031

VCMC/SP (S)

Santa Paula Family Care Clinic
1334 E. Main Street
Santa Paula, CA 93060
933-1122 **fax 933-0522

VCMC/SPW (T)

Santa Paula Medical Clinic West
254 Harvard
Santa Paula, Ca 93060
229-0200**Fax 921-1592

VCMC/SV (V)

Sierra Vista Family Care Center
1227 E. Los Angeles Avenue
Simi Valley, CA 93065
582-4000 **fax 579-6082

VCMC/WV (W)

West Ventura Family Care Center
133 W. Santa Clara Street
Ventura, CA 93001
641-5600 **fax 641-5677

WIKHOLM

Valley Medical Group
Wikholm, Gary MD
247 W. Harvard Blvd.
Santa Paula, CA 93060
525-0907 **fax 866-402-8906